

California e-file Program Participant Enrollment Form

Skip the form – enroll online at www.ftb.ca.gov

1	Application type	<input type="checkbox"/> New	<input type="checkbox"/> Update	<input type="checkbox"/> Reinstate	
2	Participant name	Name of sole proprietor, partnership, or corporation, as shown on tax return			
		Doing business as, if different from above			
3	Identification numbers	EFIN	<input type="text"/>	ETIN	<input type="text"/>
		SSN/FEIN	<input type="text"/>		
		PTIN	<input type="text"/>		
4	Participant address (Mailing address)	Street			
		City	State	ZIP Code	
	(Physical address, if different from mailing address)	Street			
		City	State	ZIP Code	
5	Contact information (Primary contact)	First name	Middle initial	Last name	
		Phone	Ext.	Fax	
		Email			
		<input type="checkbox"/> The Franchise Tax Board may send information and updates about the California e-file Program to this email address.			
6	About the participant (e.g., business owner or responsible official) (Check one)	<input type="checkbox"/> Certified Public Accountant (CPA or AICPA) # _____			
		<input type="checkbox"/> Enrolled Agent # _____			
		<input type="checkbox"/> Attorney			
		<input type="checkbox"/> CTEC # _____, surety bonding company _____			
		<input type="checkbox"/> Other, specify _____			
7	About the participant's business (Check one)	<input type="checkbox"/> Sole proprietorship			
		<input type="checkbox"/> Partnership			
		<input type="checkbox"/> Corporation, enter corporation number _____			
		<input type="checkbox"/> Non-profit tax preparation service; Volunteer Income Tax Assistance (VITA); or Tax Counseling for the Elderly (TCE)			
		<input type="checkbox"/> Out-of-State			
		<input type="checkbox"/> Limited liability company (LLC)			
	Out-of-State participants must provide a copy of their IRS acceptance letter.				
8	Participant type (Check all that apply)	<input type="checkbox"/> Electronic Return Originator			
		<input type="checkbox"/> Transmitter			
		<input type="checkbox"/> Software Developer			

**Submit your
enrollment
form**

Fax: (916) 845-0287
Mail: e-file Program MS A-1
Franchise Tax Board
PO Box 1468
Sacramento CA 95812-1468
Online: www.ftb.ca.gov

**For more
information**

Email: e-file@ftb.ca.gov
Phone: (916) 845-0353
Web: www.ftb.ca.gov

California e-file Program Participant Form Guidelines

General Information

Use this form to enroll as a participant in California's e-file Program or to update your participant information. For quicker response, enroll online at www.ftb.ca.gov. Search for: **Join e-file**.

California operates its own e-file program, independent of the IRS e-file Program. We closely follow the IRS program procedures in administering our program.

Participation Requirements

All applicants must currently be accepted in the IRS e-file Program and have an Electronic Filer Identification Number (EFIN). To transmit returns directly to us, participants must also have an Electronic Transmitter Identification number (ETIN). All participants must also comply with the requirements and specifications in FTB Pub. 1345, *e-file Handbook for Authorized e-file Providers of California Individual Income Tax Returns*, and FTB Pub. 1345A, *e-file Handbook Supplement*. We may cancel the enrollment of any participant who does not meet these requirements or does not keep his or her enrollment information current.

When to Apply

We accept e-file enrollment forms year-round. You **do not** need to reapply each year, as long as you e-file at least one California return and your status with the IRS does not change

Joining the Program

To enroll in the California e-file Program, complete Side 1 of the enrollment form and submit it to us. In addition:

- **Electronic Return Originators (EROs) and transmitters** must pass our suitability test.
 - **Software developers and transmitters** must pass a software acceptance test.
 - **Out-of-State participants** must provide a copy of their IRS acceptance letter.
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INSTRUCTIONS

Part 3: Identification Numbers

EFIN (all applicants)

Provide the six-digit EFIN the IRS assigned to you.

- If you have not received an EFIN, please wait until you receive your EFIN from the IRS to submit this form.
- If you have multiple EFINs, enter the one you will use to e-file California tax returns.

SSN/FEIN (all applicants)

Provide the social security number or federal employer identification number that is associated with the IRS EFIN you provided above.

ETIN (transmitters and software developers only)

Provide the five-digit ETIN the IRS assigned to you.

- If you have not received an ETIN, please wait until after you receive your ETIN to submit this form.
- If you have multiple ETINs, enter the one you will use to e-file California tax returns.

PTIN (only EROs who also prepare returns)

Provide your IRS-issued PTIN (Preparer Tax Identification Number).

Part 6: About the Participant

- **Certified Public Accountants** must provide their license number from their state's Board of Accountancy or their member number from the American Institute of Certified Public Accountants (AICPA).
- **Enrolled Agents** must provide their IRS enrollment number.
- **CTEC certified preparers** must provide their California Tax Education Council identification number and the name of their bonding company.

Part 7: About the Participant's Business

Check the one box that most closely describes your business. If you are an out-of-state participant, you must send us a copy of your IRS e-file Program acceptance letter.

Part 8: Participant Types

- **ERO** – EROs originate the submission of e-file returns using approved e-file software.
- **Transmitter** – Transmitters submit electronic tax return data directly to the FTB. Check your e-file software to determine if you transmit directly or through a third party.
- **Software Developer** – Software developers write and distribute e-file software that can be used by tax preparers or individual taxpayers.